

Complement of
Rodenstein (C. F.) Introduction

THE ORIGIN
OF
CÆSAREAN SECTION;
AN HISTORICAL SKETCH.

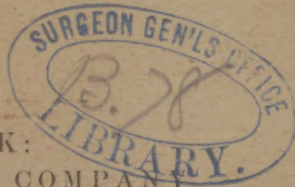
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SECOND EDITION, REVISED AND ENLARGED.

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THE ORIGIN OF CÆSAREAN SECTION; AN HISTORICAL SKETCH.

SURGERY is an art which gives no scope to the exercise of the imaginative faculty. Within its domain romance and poetry find no material for idealization. The operation for cataract and the Cæsarean section form, perhaps, the only exceptions to this remark. The exact investigations of modern ophthalmology have robbed the first of the awe and mystery which attended its performance, when learned Arabians and less learned mountebanks travelled through Europe and restored sight to the rayless orbs of the blind; but to the second cling still some of the vague terrors inspired by surgical procedures not perfectly understood, some of the mythological mists of the ages in which it is said to have originated.

In fact, there is something in the very circumstances under which this operation is performed, which excites an undefined dread. The very process of parturition is shrouded, to the unprofessional mind, I know not in what halo of sacredness and mystery. When labor is difficult or obstructed, the interest is heightened; and that mingled sentiment of dread and anxiety, of alternate doubt and hope, culminates when, in the most desperate crisis of dystocia, Cæsarean section is performed, as the last resource of obstetric art.

Sometimes this heroic intervention is adopted to save two lives from impending destruction; sometimes to save a mother after her child has already been sacrificed to her safety; sometimes the dead body of a woman is opened to deliver a living child, thus literally rescuing life from the embrace of death.

An operation so grand in its simplicity, so brilliant in its success, so mysterious in its disasters, is well calculated to impress the imagination of mankind. Its very name has an imposing sound, and carries the mind back to the imperial grandeur of Rome. Its origin has been placed amid the twilight ages of the gods. The immortal verses of classic bards celebrate the birth of Olympians, demi-gods, and heroes, who are said to have entered the realms of light through its agency. The enactments of the most ancient code of Roman legislation and the sacred traditions of the Jewish Talmud have been invoked in sanction of its performance. And I might easily increase the store of ancient lore which adorns our text-books, by adding quotations from the sacred literature of the Hindoos, from the Zend-Avesta of the Parsees, and the hieroglyphic legends of Egyptian monuments and papyri, as appropriately illustrative of this operation as those adduced from the classics.

While reading the accounts of the earliest reputed cases of Cæsarean section, I was led to form a different opinion with regard to its antiquity from that which is generally entertained. The first thing that roused my suspicion was the silence of ancient medical authors on this subject. Neither the genuine nor the apocryphal books of Hippocrates contain a line about it. Aretæus, Galen, Celsus, Oribasus, Ætius, Paul of Ægina, have each written on obstetrics; but not one has mentioned this operation, of which they could not be ignorant had it been practised in or before their day.

Instead of quotations from these or other medical authors we are treated with citations from Pliny and the poets in proof of its antiquity. The passage so frequently quoted from Pliny in connection with this subject occurs in a description of wonderful births. The manner in which a man enters into life exerts an occult influence upon his destiny. Difficult labors are of bad omen. Footling presentations are peculiarly unlucky. But those children, he continues, whose birth has cost the mother her life, are evidently born under favorable auspices. For such was the case with the first Scipio Africanus; "*Primusque Cæsarum a cæso matris utero dictus; quæ de causa et Cæsones appellati.*" In the preceding chapter he had stated that difficult labors are disastrous to the child and

to mankind. He derives the name of Agrippa from "*Ægre partus*," and refers to the sufferings of Agrippa from the infidelities of his wife, and to the cruelty of Nero, who was born of Agrippina, as the proof of his statement; and, by a pun almost as execrable, he illustrates his opinion that hysterotomy is a happy augury to the child, because Cæsar was cut from his mother's womb. Other writers, however, tell us that the name of this illustrious Roman had nothing to do with his birth. Festus derives it from Cæsaries, and says he was surnamed Cæsar because he had a very heavy head of hair. Others say that the name of Cæsar is derived from a Punic word, which signifies elephant; and that the first of the Cæsars was so called because he kept an elephant.

Whatever may be the meaning of the word, the historical accuracy of Pliny cannot be questioned. He assures us that at Saguntum a child returned to the womb of its mother after its birth; that Aleippe was delivered of an elephant; that in Thessaly a hippocentaur was born of a woman; that he himself saw one brought from Egypt preserved in honey. After this, we are quite prepared to believe that Cæsar was cut from the womb of his mother.

The operation under consideration, which now bears the name of Cæsar, is, however, older than Cæsar, if the statements of the poets may be accepted. Virgil sings of one of the Trojan heroes:

. . . . "Licham ferit exsectum jam matre peremptû
Et tibi, Phœbe, sacrum casus evadere ferri,
Cui licuit parvo."

Those who were brought into the world in this preternatural manner were dedicated to Apollo, probably because he first performed the operation at the birth of Æsculapius, after he had slain his mother for her infidelities:

"Ut tamen ingratos in pectore fudit odores,
Et dedit amplexus, injustaque justa peregit:
Non tulit in cineres labi sua Phœbus eosdem
Semina: sed natum flammis uteroque parentis
Eripuit, geminisque tulit Chironis in antrum."

The same poet informs us that Bacchus also was cut from his mother's womb. But, according to the oldest traditions, it was not Bacchus, but Apollo, the god of Light and Science

himself, who, like the god of Medicine, was taken out of the womb of his mother. However, Ovid sings :

“Imperfectus adhunc infans genetricis ab alvo
Eripitur, patrioque tener (si credere dignum),
Insuitur femori; maternaque tempora complet.”

But it has been said that although Cæsar may not have been cut from the womb of his mother, and although the gods and heroes whose unnatural births the poets have celebrated may have had no existence except in fabled stories of mythology, Cæsarean section must have been known to the ancients, or these writers could not have ascribed the birth of their heroes to this extraordinary intervention of surgery. But might we not—resting upon the same authority, and appealing to the same quotations—claim with the same propriety, that the ancients must have been in possession of a method of preserving the life of a prematurely-expelled fœtus, by placing it in the incised thigh of its father? Or, referring to an older but more familiar incident, that an operation for disarticulating the ribs under anæsthesia must have been known in pre-Mosaic times, for we read in the Bible: “And the Lord God caused a deep sleep to fall upon Adam, and he slept; and he took one of his ribs, and closed up the flesh instead thereof.”

Myths have no actual facts for their foundations—they are the unconscious products of a psychological process. Only to modern physicians, ignorant of the manner in which mythology originated, could the thought occur that such theogonic dreams as the birth of Apollo and Æsculapius were constructed after the pattern of an obstetric operation known and practised in antiquity.

To prove the antiquity of Cæsarean section, not only the myths of the classics, but also the traditions of the Jews have been cited. The Talmud contains several passages which are supposed to refer to this operation. English authors generally accept them as conclusive evidence; but some of the German writers maintain that they refer only to Cæsarean section *post-mortem matris*. The passages in question are translated into English as follows: “In case of twins, neither the first child which shall be brought into the world *by cutting into the abdomen*, nor the second, can receive the rights of primogeni-

ture, either as regards the office of priest or the succession of property." "It is not necessary for a woman to observe the days of purification after the removal of the child through the parietes of the abdomen." These are the quotations of the Talmud itself, which was composed between the beginning of third and the end of the fifth century after Christ. The other authorities adduced are taken from commentaries on these passages, and the oldest of these are Rashi 1029-1097 A. D., and Maimonides 1135-1204 A. D.

Now, as far as the teachings of the Talmud itself are concerned, the evidence of a birth being accomplished through abdominal section is positive, in the English translation. In the original text it is not quite so plain. In the first place, there is not a word said about cutting; and, in the second, the word translated abdomen and abdominal parietes means something else. A Latin translation, published in Amsterdam, 1702, renders the first passage as follows: "Si quis e latere prodierit et quis post illum venerit, neuter primogenitus est, neque pro hereditate, neque pro sacerdotio." The translator selected "latere" for *Joze dofan*, because it has the same wide range of meaning, and may be rendered either by side or wall, as the Germans translate it. The primary meaning of the Latin, as well as of the Hebrew root, is to surround, to enclose, to conceal. In a certain connection it might be translated abdomen; but it may certainly be used for any thing that encloses, hence for a membrane. In commenting on these passages, Rabbi Rashi says, according to his English translators: "The abdomen must be opened by samm, the child extracted, and the parts healed." Samm, it is said, means a sharp cutting instrument. It is a word derived from the same root which, in the Bible, is translated aromatics; and Reich renders it by "a medicament," and presumes it must be a powerful caustic (Vienna paste?) by which the abdomen was opened. In the Nida, samm is spoken of as a means to produce abortion; while the word translated abdomen is in the plural, and means bowels. Again, Maimonides is quoted as saying: "A woman who cannot bear a child in the natural way shall be opened in the side, and in this way delivered of her offspring." Here the word translated side is

dual, and means thighs; and the Hebrew root from which it is derived means, to be tender, soft. It not only includes the thighs but the region between the thighs, the region where the hand was placed in the rite of circumcision, and those parts which became rotten when a woman became unclean in adultery. (*Vide* N. v., 21.)

I propose, therefore, the following paraphrase of the passages in question :

If a woman has a difficult labor, some medicine is first given her to open the bowels. This is a literal translation of Rabbi Rashi. That the Germans should not catch the sense of the original by a literal translation is easily conceived; but English physicians ought certainly to know what is meant by opening the bowels. Then her thighs are to be abducted, and the membrane ruptured, and the child extracted. But if under these circumstances she bear twins, neither the first thus extracted, nor the second that comes out without help, is entitled to the right of primogeniture. The reason for this is evident from the stand-point of the Jewish faith, for "it is Jehovah that opens the womb;" but in artificial delivery the midwife determines the precedence in twin-birth, and would thus confer upon the child the right of primogeniture. Why a woman should be exempted from the rites of purification under the circumstances is not so clear to my mind.

That I am right in my interpretation may be seen from a passage in the Talmud, where it is said that firstlings of animals are not fit for sacrifice if born by the intervention of art. Were I to translate this passage as the others have been translated, it would read: "When one-third of a young is born through the abdominal incision, and two-thirds through the natural way, the animal is unfit for holy purposes." This was done first, adds Rashi, by medicaments and the knife, and then the uterus expelled the other two-thirds spontaneously, or the young is torn out sometimes alive, sometimes dead. What possible sense would there be in these sentences? but read: "When one-third has passed through the thighs, i. e., the external organs of generation, and two-thirds are retained in the uterus, and there is an impossibility of giving birth, the symphysis pubis is cut through, as is done whenever an animal

is butchered, and then the uterus expels the rest of the body, or it is pulled through by force; still, such a young is not fit for sacrifice, whether living or dead." And if Maimonides, who was a celebrated physician as well as a learned rabbi, suggests, "*Hoc etiam fieri solet in mulieri quæ difficulter parit*," he may have foreshadowed the Sigaultean operation, or, living in the thirteenth century, he may have heard reports of Cæsarean sections *post mortem matris*, and may have thought of its application to living women; but that the Talmud bears witness to the performance of that operation either upon the living or the dead, during or before its composition, I think I have sufficiently disproved.

Another authority, more venerable in its antiquity than those I have already noticed, is constantly quoted in favor of Cæsarean section. It is the so-called Royal Law, attributed to Numa Pompilius. This code, it is true, only enjoins the opening of the body of a dead woman in case she died pregnant, for the sake of delivering her child. It would be a most remarkable law if it had been enacted in the earliest period of Roman history; but its authenticity is very questionable. It is found in the Digest, but how it came there is not very well known. During the consulship of Publius Cornelius Cithægus, five hundred years after the death of Numa Pompilius, the laws of that early legislator were accidentally disinterred. They were written upon papyrus (a remarkable thing for that Roman to have had in his possession). It is not worth while to inquire whether they contained the *lex regis*; for they were immediately burned on their discovery by Q. Petilius, the prætor, because they contained things, says Livy, inimical to the prevailing religion.

Nor can we suppose that this law originated at Rome during the reign of the early emperors. In a state where every child had to be first acknowledged by its father before it acquired a legal existence; where the life of a child was always held at the option of its father; where childhood as such had no rights whatever, what motive could there be in *such* a state for enacting a law to save an unborn infant? That Rome wanted inhabitants, and a military state needed soldiers? For this purpose some states have encouraged po-

lygamy, and Rome might have suppressed fœticide; but from Juvenal's castigations we may learn that Restelleism was practised in Rome even more freely and openly than it is in New York. To suppose that Rome would enjoin Cæsarean section to save infantile life is preposterous. For motives of such a law we must look to a state of society altogether different from that which characterized pagan Rome. If I mistake not, we shall find its origin in those ages in which so many other decretal edicts and constitutions assumed the sanction of antiquity, to give security to the possession of titles to dignities and property, or to enforce the observance of rites and usages. Toward the close of the middle ages we find the Royal Law put in force—not so much to save the life of a child, as to secure it the benefits of baptism.

After the propagation of the Christian religion, intra-uterine life assumed an importance which it never would have had in heathen lands. The two great doctrines of the faith centre in the very act of conception. It is in conception that man becomes a partaker, not only of the stain and the depreciation of Adam's transgression, as he might of tuberculosis or syphilis from a less remote ancestor, but also of the guilt of the act which first produced the moral degeneration. And the second great dogma of Christianity teaches us that, in the very act of conception in the womb of the blessed Virgin, God, by assuming human nature, delivered humanity from the stain of original sin. The Church has always taught that through baptism, and only through baptism, men become partakers of Christ's redemption. Hence during the middle ages, when these doctrines received their fullest development, especially by the labors of St. Thomas Aquinas, the attention of the Church was directed toward giving to her children the benefits of baptism at the earliest possible moment. She ordered the baptism of a prematurely-expelled fœtus, and attempted to devise means by which, if a pregnant woman died, at least the soul if not the life of her offspring might be saved.

About this time we find reports of men who were said to have been untimely ripped from their mother's womb after her death. Gorgius de Leontine is mentioned by Abraham Tiltingh, as the first who was delivered by hysterotomy after

the death of his mother. Unfortunately, this author does not inform us of the sources of his information. Sancho Mayor, King of Navarre, was torn from the entrails of his mother Clinine, by Gaevara, one of the nobles of the realm, after she had been slain by the Saracens. The celebrated Doge Andreas Doria is said to have entered the world after the same manner. Burkhardt, Count of Linggen, afterward Abbot of St. Gallen, was called Ingenitus, it is said, because he was not born but torn from his mother Wendilgard. Whether the name suggested the legend, or whether he actually assumed that name on entering monastic life on account of the manner of his birth, must remain uncertain. Gebhardt, Count de Bragance, and Bishop of Kostnitz, St. Lambert, St. Raymond, Nonat, and several other celebrated ecclesiastics, and among others a Pope, Gregory XIV., are reported to have been rescued from impending death by Cæsarean section *post mortem matris*. It is very difficult to ascertain whether any of these cases are authentic. The middle ages were as prolific of legends as the prehomeric ages were of myths, and these accounts would appear more credible if they were not urged to prove that an infant can live a lengthened period after the death of his mother. The Church was determined to save the souls of unborn infants. She devised Cæsarean section to secure to children of dying women, life if possible, but baptism at all events. The councils of Cologne (1280), of Sens (1514), and Langres (1404), passed canons to make this operation obligatory. Some of her most celebrated fathers, as St. Charles Borromeo, insisted on its performance in their popular teachings. They quoted such instances as I have referred to in proof that the life of a child may be preserved two, three, and even seven days after the death of its mother. Who knows but that Providence, which has so frequently suspended the laws of Nature, to establish the doctrines of Christianity by the proof and *éclat* of miracles, may also in these instances have interfered to establish and strengthen the faith and charity of the Church? But on purely physiological principles it is as difficult to believe in the prolonged continuance of foetal life without placental circulation, as it is to believe that the Countess Matilda of Henneberg gave birth at

one time to 365 children, half of which were males, and half females, and the odd one an hermaphrodite—which rests pretty much on the same authority.

It will be noticed that, so far, our accounts of this operation are derived from myths, legends, and other unprofessional sources. But toward the close of the middle ages physicians were consulted as to the best method of realizing the benevolent intentions of the Church. Versalius's theory of the respiration of the fœtus prevailed at that time, and they recommended that a reed should be placed between the teeth of the mother until the operator could arrive. And consequently the Synods of Cologne (1528) and of Cambrai (1550) did so decree. It is probable that about the same time, or somewhat earlier, the Royal Law of Numa Pompilius was first introduced into the civil code. At least, the earliest notice that we find of it, is its enactment by the Council of Venice in 1608. Afterward it was adopted and enforced by the kingdom of Naples and the Two Sicilies. These governments appointed physicians whose duty it was to perform the operation upon every pregnant woman who died.

But somewhat earlier we find well-authenticated cases of Cæsarean section *post mortem matris* recorded by medical authors. The first recorded cases which I could find were those of Cornelius Gemma, professor of Louvain; he says that he extracted six living infants after the mothers had breathed their last sighs. Horace Augenius, professor at Turin and Padua, reports that he opened the corpse of a peasant, who had died of an ulcer in the stomach, and extracted a living child, which he baptized Fortuné. Crato de Crafftheim saw the great anatomist Julius Cæsar Avanzi bring a child into the world in this manner. Since that time many well-authenticated cases have been reported, but in none has the operation proved successful if it has not been performed within a few minutes of the mother's death.

There are vague reports extant in the literature on this subject to the effect that Cæsarean section had been performed upon living women during the fifteenth and sixteenth centuries. Indeed, the learned Arabians, who, by their clumsy translations of Greek authors, and the pursuits of occult

arts, have acquired a factitious eminence in every branch of literature, are also quoted in this connection, as having known and practised abdominal section for the delivery of a child. But the only foundation for this assumption is a quotation in the work of the distinguished Florentine physician, Nicolaus Nicolas, who says that a case similar to that which he reports has been mentioned by Abulecassem. Now, this case has been cited as one of the earliest Cæsarean sections performed in Europe. But Nicolas himself does not relate it as an operation, but simply says that, in a pregnant woman, a diminution in the size of the abdomen was noticed, accompanied by a watery discharge from the womb, *emissis pluribus superfluitatibus*, that no fœtus was expelled, but that at last, several months afterward, foetal bones were taken through an opening in the abdominal walls, after which the woman became well. Whatever may have been the special abnormal condition of pregnancy in this instance, it is certain that it was not relieved by Cæsarean section. On the contrary, Nicolas suggests the possibility of imitating Nature in such cases by opening the abdomen, which implies that in this instance Nature accomplished the cure by an ulcerative process.

Probably a similar condition existed in the case of Jacob Nufer, of Sigerhausen, the cattle-gelder, who is reported to have performed this operation upon his own wife at the beginning of the sixteenth century. This is the case which has been almost universally quoted as the first authentic Cæsarean section made on a living woman. But the learned Caspar Bauhin, from whom all the subsequent writers have borrowed their accounts, reports this operation nearly a hundred years after its occurrence as a mere matter of hearsay, and from his statement it is by no means clear, even if such an event had actually occurred, that it can be looked upon as a Cæsarean section; he says: "He placed his wife upon the table, opened the abdomen just as he would in a hog, and, fortunately, at *the very first cut*, the belly was opened, and a child was rapidly extracted through the wound. If this be a description of an actual occurrence, it resembles the opening of an abscess in extra-uterine pregnancy much more closely than that of hysterotomy. But, taking all the circumstances of the case

together, the peculiar vocation of the operator, the opening of the abdominal cavity with one stroke of the knife, the wonderful success of the operation—for his wife lived and bore him several children without any difficulty—I am much more inclined to place Nufer and his heroic achievement among the popular legends so rife at that age than among the actual occurrences of history.

In the correspondence of Doring and Hildan on the question of the Cæsarean section, we find an operation referred to which was first reported by Nicholaus Polins, as having been performed in Weisse, Silesia, on the 9th of December, 1531, and which is generally reported among the early cases of Cæsarean section. The patient had been suffering since her first confinement from some abdominal trouble, but had, notwithstanding, survived eight subsequent deliveries. Soon afterward a swelling was noticed in the left hypochondrium, which gradually increased until it formed an enormous fluctuating tumor, in which a living child was finally diagnosed. According to the customs of those times, a council was held between "physicians, surgeons, midwives, and other honorable women," who agreed to open the tumor. The operation was performed, and a living child was born, but the mother died a few days afterward. Further details of the proceedings are recorded, but none which would shed light either upon the nature of the abnormal condition or of the operation; and certainly, from this statement, we have no reason to suppose that this operation was a Cæsarian section.

In the same work there is another case reported which cannot be looked upon as any thing else than rupture of the uterus. The patient, Margarethe Volezer, was near her confinement in 1545, when suddenly a loud noise was heard within her, and from that time foetal movements were no longer felt. For four years she suffered intensely; several abscesses had formed and discharged fetid matter. On the 10th of November, 1549, Paul Dirlervang, city surgeon of Vienna, made a laborotomy, and extracted by piecemeal a putrid foetus.

A very similar case is mentioned by Achilles Gassams, as having occurred in the middle of the tenth century. The pa-

tient approached the time of her confinement, but the expected confinement did not take place. After suffering from various ills, she gradually recovered sufficiently to attend to her household duties. After some time it was found that an abscess had formed in the left lower region of the abdomen, which was opened by Clæsi, an Austrian army-surgeon; a large quantity of fetid pus was discharged, and several bones of a foetal skeleton were subsequently extracted.

In the accounts of these operations, to which that of Primrose and perhaps one or two others might be added, we do not find any mention made of an actual incision of the uterine walls. But there is a case reported by Marcellus Donatus, which occurred in 1540, nearly fifty years before the date of his book, in which it is distinctly mentioned that, after dividing the abdominal walls and the peritonæum, an incision was made into the uterus and a dead boy extracted; after which the uterine cavity was cleansed with aromatic wine, and the womb healed, partly by the use of actual cautery and partly closed by sutures. This account might be received as true, if it were not for the personal character of the operator. This man, whose name was Christofer Bain, is described in the text as an illiterate and audacious pretender, who travelled from village to village performing miraculous cures, and who, in this instance, made the previous stipulation that he should receive ten golden ducats if he succeeded. His word seems to be the only authority for the authenticity of the operation. If he actually opened the abdomen, it is probable that what he incised, after dividing the peritonæum, was the wall of the cyst in which the product of an extra-uterine pregnancy is generally contained. This woman is also said to have conceived and borne in a normal way afterward.

In the year 1581 appeared the celebrated work of François Rousset. It bore the title "*Traité Nouveau de l'Hyterotomie, ou Enfentement Cæsarienne.*" It related the histories of fourteen successful Cæsarean sections, six of which were performed upon the same individual. Most of his cases were repeated from mere hearsay, and the others are taken from letters written to him by friends. He had never made a Cæsarean section himself; but he had travelled some distance

to see a woman who had been operated on, and she showed him a scar on her belly! Our faith in his accuracy or honesty will be shaken if we judge of the credibility of his histories by the account of the woman at Mesnil, who had been delivered by Cæsarean section in six successive pregnancies, and died in the seventh, because the barber Nicolaus Guillet, who had confined her before, had died, and no one else could be found to perform the operation. Regret as we may his credulity or suspect his impartiality, we cannot but admire the enthusiasm with which he defended his cause, and acknowledge the merit of his work in bringing before the profession the possibility of saving a woman who cannot otherwise be delivered of a living child.

It is true, Rousset exaggerated the facility and harmlessness of the operation which he baptized Cæsarean. He recommended it in cases where modern midwifery can see no indication for its performance. On the first page of his work he compares it to the Gordian knot, and invites the confraternity of the knife boldly to sever it. But, though his enthusiasm carried him too far, he is entitled to the honor of having first proposed it as a legitimate operation in surgery, notwithstanding that he had never performed it himself; for it is almost certain that no one had ever made it upon a living woman when he published his book.

The appearance of this work created considerable attention. It was soon translated into Latin by the learned professor of Basle, Kaspar Bauhin, and thus made accessible to the medical profession throughout the world; while Melehior Libizius made a German translation which he dedicated to the Countess Palatine Elizabeth. Rousset met with enthusiastic admirers and violent opponents. Some of his most celebrated contemporaries maintained the impossibility of performing the operation successfully. Ambrose Paré, Rollfinck, and Dyonesius, questioned the authenticity of his reported cases. The first Cæsarean sections mentioned after the publication of his work are said to have proved fatal. Guillemeau reports five such instances, and bases upon them an attack on Rousset, which called forth from the latter a reply of such forcible reasoning, says Spengler, as to secure the

approbation of all his readers. A second defence was demanded in answer to a scandalous publication of Jacques Marchand, whose violence was only equalled by Sacomb, the founder of the anti-Cæsarean school.

The cases upon which the opponents of Rousset based their arguments were certainly no more authentic than those adduced by Rousset, Baulhin, and their copyists. The impression that Cæsarean section was frequently performed in France at that time is entirely erroneous. It is very remarkable, but nevertheless true, that many incidents, related and relied upon as facts in the history of this subject, were without any other foundation than the unfortunate mistakes of translators. For instance, we read, in almost every historical sketch of Cæsarean section, that the Dominican monk, Scipio Mercurio, who was also a celebrated physician, writing at the close of the sixteenth century, says that Cæsarean section was as generally performed in France as venesection in Italy, when really he only says that it was as well known. And it was well known there simply because Rousset's work had been published a short time before, and was the subject of animated discussion.

While it must, therefore, remain doubtful, to say the least, whether this operation had really been performed in France, even at the beginning of the seventeenth century, we find the record of a Cæsarean section made in Germany, of the authenticity of which there can be no doubt. And, inasmuch as it is the first well-authenticated instance in history, in which the abdomen and uterus of a living woman was cut through and a living child extracted through the wound, and as it is the type and exemplar of every subsequent repetition of this operation, and furnishes illustrations of this heroic and brilliant intervention of obstetric surgery, I may be permitted to translate a full report of this remarkable event.

This operation took place at Wittenberg, and is related by Prof. Daniel Semert, who advised and superintended its performance, as follows: "Therefore, when, on the 21st of April, 1610, the woman's labor began with the commencement of pains, the gracious help of God was first of all implored. Besides myself there were present my colleagues, Drs. Ernst

Hettenback and Tobias Yundler; furthermore the archdeacon of our parish church, M. Heinrich Silbermann, two midwives, and several other honorable women. The operation itself was performed at eight o'clock in the morning by the surgeon Trautmann, with the assistance of another surgeon Christoph Gusth. First the abdominal walls and then the peritonæum were cut through. For the last, at least as far as I could convince myself by inspection, lay uninjured beneath the skin, and could be easily distinguished from it and the edges of the wound. After this followed the opening of the uterus, which protruded beyond the normal curvature of the abdominal parietes. The hemorrhage was not excessive, nor the pain great, as the patient herself stated afterward. After the uterus was cut through lengthwise, the child with the after-birth were taken out without any difficulty. In fact, as soon as a way was opened, the child itself, which, thanks and glory be to God! was healthy and unhurt, as it were by its own exertion sought this outlet. But, with the still existing size of the uterus, there was no prospect of bringing it back into the abdominal cavity. The blood was therefore first removed by the use of an appropriate decoction, and then the edges of the abdominal wound were drawn over the uterus and sewed together, but the wound of the latter was not secured by sutures, although the uterus was thereby saved from any notable appearance of inflammation. The womb (still protruding through the abdominal wound and exposed to the air, whose influence could not be excluded during the healing process) was covered by a layer of puriform matter, which was, however, afterward removed by proper medication. The womb assumed a clean appearance toward the fourteenth day, and regained its general appearance and shape; it also contracted more and more, and returned to its original size. Some days afterward the edges of the wound began again to assume a blackish appearance and bled at the slightest touch; in short, gangrene had so far developed itself that small pieces could be taken off with a knife without producing any pain. This untoward condition was, however, again removed by appropriate treatment. Those fleshy masses which sprouted from the edges of the wound entirely disappeared, and the latter again assumed their former color and extent, and the wound became smaller

from day to day so markedly that we were authorized to expect its closure in a very short time, and that scarcely any doubt remained of complete recovery. But, on the 16th of May, at four o'clock in the afternoon, when the patient was about to lie down again, having passed a short time out of bed, she was seized with a fainting-fit and died, contrary to all expectation, in the course of about half an hour. Certainly this unfortunate woman could not have been treated properly by her attendants during the fainting-spell. But, to convince ourselves that the uterus of the deceased was all in order, and that after all no hidden suppurative process lay at the bottom of this attack of fainting and the sudden departure of the patient, we opened the womb; we found, however, no diseased condition. The child is still alive, and by God's mercy is strong and healthy."

The importance of this case and its influence upon the subsequent development of the operation cannot be overestimated. We might wish that some features of the pathological condition which necessitated the operation might be more fully described. We may regret the imperfect account given of the results of the autopsy. But we have at least here an unmistakable Cæsarean section, whose authenticity cannot be questioned. This translation is made from the "Medical Institutes" of Daniel Lemort, a celebrated professor of the school at Wittenberg, whose character and learning command implicit confidence. The facts, as related by him, have been accepted by his contemporaries. While in France the controversy raged with unabated passion as to the possibility of a successful Cæsarean section, in which one party reports only success, and the other only failure, and the want of evidence makes us doubt whether any of these cases have ever really occurred, we have at last an instance whose historical verity is beyond question. The Wittenberger Cæsarean section became the subject of many learned disquisitions in Germany. The most noted of these is the correspondence between Michael Döring, of Breslau, and Fabricius Hildanus, of Bern. But, notwithstanding that this operation received the sanction of the highest medical authorities of that age, the example of Trautmann found but few imitators during the seventeenth century.

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